

Mail
THE CLEVELAND MUSEUM OF ART

FORTY-SIXTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
MAY 6 to JUNE 14 1964

Born in Cleveland YES NO

PLEASE
LETTER
PLAINLY
OR TYPE

Collaborator if any _____

Address 2027 E. 115th ST. CLEVELAND
NO. STREET

CITY

Artist _____

H. C. CA SSILL

FIRST NAME

ZIP CODE

CUYAHOGA

COUNTY

LAST NAME

Tel. 241-1652

Out-of-town residents should state whether return shipment is required. YES NO

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank..

NUMBER FOR SALE	NUMBER IN EDITION (Graphic Prts.)	PRICE	TITLE	MEDIUM	CLASS	DO NOT WRITE IN THESE COLUMNS
25	25	\$40	IN SUMMIT COUNTY	WOODCUT	4	1244 R
25	15	\$90	DOUBLE PORTRAIT	WOODCUT	4	1245 R
25	25	\$50	APPARITION OF THE OTHER BROTHER UNTITLED (AS YET)	INTAGLIO	4	1246 A

frame - \$15

SUBMIT ENTRY BLANK NO LATER THAN MARCH 9, 1964.

This entry blank must be fully made out (typewritten or plainly lettered) and signed.
Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the
Museum will have the right to dispose for its own account any entry not called for by
July 23, 1964.

It is also understood that accepted entries will remain on exhibition until June 14, 1964.

The submission of entries will be construed as acceptance of all conditions printed
in this entry blank.

H. C. Cassill

SIGNATURE

PAID MAR 06 1964